

# CALIFORNIA MEDICAL ASSOCIATION

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## *C. M. A. Statement of Principles*

### ON THE MEDICAL AND HOSPITAL CARE OF INDIGENTS BY COUNTIES

*The following statement was adopted by the Council of the California Medical Association at its regular meeting January 14, 1950.*

#### STATEMENT OF FACTS

1. The residents of counties in California are morally and legally obligated to provide medical care and hospitalization for those persons residing in the county who are unable to secure such care through their own resources.

2. To provide such service, it has been the custom of the counties, with few exceptions, to maintain a county hospital, in which are located beds for the care of the indigent sick, surgical facilities for those who need them and, in many instances, clinic facilities for the care of ambulatory patients.

3. It has also been the custom of most counties to provide both hospital bed and clinic facilities on the basis of maximum demand; such facilities are often not in use because the morbidity rate is below the maximum anticipated.

4. The provision of maximum demand facilities has not constituted a financial strain on the counties until recent years, when construction costs have risen materially. Inasmuch as the counties are legally required to keep their bonded indebtedness within a fixed maximum, the provision of additional hospital and clinic facilities at this time represents an extremely difficult financial operation, often impossible.

5. At the 1949 session of the State Legislature, A.B. 916 was enacted as Section 202 of the Welfare & Institutions Code. This law provides that the counties may contract with private individuals and institutions for the medical and hospital care of those indigents who are legally entitled to be given such care at the expense of the counties. This law makes it possible for the county governments to utilize the facilities of private hospitals and private medical care facilities (doctors' offices) in caring for eligible indigents and thus save (a) capital investments in facilities and (b) prolonged expensive hospital sojourns.

6. There exist in California today some 271 private hospitals with 48,829 beds for sick patients, many of these institutions having clinic facilities for the care of ambulatory patients. There also exist some 12,000 offices of private physicians capable of and licensed to treat ambulatory patients.

7. There exists in California today an organization of more than 10,000 physician members, California Physicians' Service, capable of contracting with

county governments for the out-patient medical care of county indigents.

8. There exist in California today two hospitalization organizations, Hospital Service of California and Hospital Service of Southern California, both being non-profit organizations of hospitals capable of contracting with county governments for hospital care of county indigents.

#### CONCLUSIONS

1. Present construction costs make unwise the building of more county hospital facilities, either beds or clinic quarters, at this time unless urgently needed. Construction is only the beginning—maintenance goes on forever.

2. The maintenance of large county hospital facilities is a continuous financial drain on taxpayers.

3. The cost of operating county hospitals, including the maintenance of maximum facilities, is considerably higher than the comparable cost of private hospitals per patient per day.

4. The cost of operating county hospital clinic or out-patient facilities, including the maintenance of maximum facilities, makes for a high per-patient cost for the care provided.

#### PRINCIPLES

1. Additional county hospital construction in California, except for possible additional beds for the acute sick, is not needed at this time.

2. The counties should avail themselves of the provisions of Welfare & Institutions Code, Section 202, in contracting for the care of their indigent charges.

3. The facilities of the two hospitalization organizations and of California Physicians' Service should be utilized to the full by the counties in contracting for hospital and medical care for their eligible indigents.

4. The counties must retain the obligation of providing a social service screening of county residents for the determination of eligibility to receive these contracted services.

5. The counties should carefully survey the available medical and hospital care facilities within their own borders prior to seeking state or federal funds or incurring additional bonded indebtedness for added hospital construction.

## Council Meeting Minutes

### 367th Meeting

*Tentative Draft: Minutes of the 367th Meeting of the Council, Los Angeles, January 14, 1950.*

The meeting was called to order by Chairman Shipman in Conference Room No. 8 of the Biltmore Hotel, Los Angeles, at 9:30 a.m., Saturday, January 14, 1950.

#### Roll Call:

Present were President Kneeshaw, President-elect Cass, Speaker Alesen, Vice-Speaker Charnock, Councilors Shipman, MacLean, Ball, Crane, Henderson, Anderson, Ray, Montgomery, Lum, Pollock, Green, Bailey, West, Frees and Thompson, and Editor Wilbur.

Absent for cause: Secretary-Treasurer Garland.

A quorum present and acting.

Present by invitation were Executive Secretary Hunton, Assistant Executive Secretary Wheeler, Legal Counsel Hassard, Field Secretary Clancy, Messrs. Clem Whitaker, Jr., and Ned Burman of public relations counsel, Dr. Wilton L. Halverson, State Director of Public Health, county society executive secretaries S. K. Cochems of Los Angeles, Glenn Gillette of Fresno, Vance Venables of Kern, K. C. Young of San Diego and William O. Tobitt of Orange; Dr. Lowell S. Goin, president, and Mr. William M. Bowman, executive director of California Physicians' Service; Drs. E. Vincent Askey, J. Lafe Ludwig, Louis Regan, John Ruddock, Eugene Hoffman, Sam J. McClendon and Clarence Rees; Mr. Ritz Heerman.

#### 1. Minutes:

(a) On motion duly made and seconded, minutes of the 366th meeting of the Council, held November 20, 1949, were approved.

(b) On motion duly made and seconded, minutes of the 217th meeting of the Executive Committee, held December 14, 1949, were approved.

(c) On motion duly made and seconded, minutes of the 218th meeting of the Executive Committee, held December 22, 1949, were approved.

#### 2. Membership:

(a) A report of membership as of January 13, 1950, was received and ordered filed.

(b) On motion duly made and seconded, five members whose 1949 dues had been received since the last Council meeting were voted reinstatement.

(c) On motion duly made and seconded in each instance, six applicants were elected as Associate Members. These were:

Alameda County: Melvin B. Black, Catharine Eastman, Benjamin A. Kogan, Reinhard B. Lewis.  
San Francisco County: Irene A. Heindl, Lloyd E. Wilson.

(d) On motion duly made and seconded in each instance, seven applicants were elected to Life Mem-

bership. These were: Howard R. Parker, Alameda County; Lloyd Mills, Los Angeles County; L. B. Barnes, Placer-Nevada-Sierra County; R. R. Root, Riverside County; Burt F. Howard and Charles I. Titus, Sacramento County; and J. M. O'Donnell, San Benito County.

(e) On motion duly made and seconded in each instance, ten applicants were elected to Retired Membership. These were: Harry Auslen and Frank W. Redmonds, Alameda County; John W. Bumgarner and George W. Sweetser, Contra Costa County; George Berger, John W. Robinson and Raymond G. Taylor, Los Angeles County; Eleanor B. Rodgerson, Sacramento County; Lyman Elanson Thayer, San Bernardino County; Elmer J. Chesbro, Santa Clara County.

(f) On motion duly made and seconded in each instance, eleven applicants were granted a reduction of dues because of illness or postgraduate study.

#### 3. Financial:

(a) A report showing bank balances and other items as of January 13, 1950, was received and ordered filed.

(b) On motion duly made and seconded, an appropriation of \$5,000 originally made in 1948 to the Committee on Medical Economics, and not expended, was reaffirmed as applicable to the 1949-1950 fiscal year.

#### 4. Industrial Fee Schedule:

President Kneeshaw summarized the meetings and other actions leading up to the adoption by the Executive Committee of a new schedule of fees for industrial accident cases and there was general discussion. The proposed new schedule has been approved by representatives of insurance carriers and has been presented to the Industrial Accident Commission for approval.

After considerable discussion, it was regularly moved, seconded and voted that the decision and actions of the Executive Committee be ratified by the Council, with the understanding that no fees in the new schedule be at levels lower than those in the 1946 schedule adopted by the Industrial Accident Commission.

Doctors Pollock and Thompson voted in the negative.

The Chairman called attention to the fact that a permanent committee is to be appointed to meet with a similar committee from the insurance carriers. He stressed the importance of a careful selection of the membership of this committee and asked all members of the Council to consider this matter and be prepared at the next meeting to present nominations.

#### 5. California Physicians' Service:

Dr. Lowell S. Goin, president of California Physicians' Service, reported on the establishment of a

new committee in C.P.S., composed of chairmen of standing committees and meeting the day before board of trustees meetings; this has resulted in increased efficiency in board actions. He also reported that as of December 31, 1949, C.P.S. has approximately 875,000 beneficiary members and 10,326 physician members. Dr. Goin stated that under new legislation C.P.S. can deal directly with boards of supervisors for the ambulatory care of county indigents and that 16 county medical societies have shown an interest in establishing such a system; C.P.S. prefers that the county societies initiate interest and action in such instances.

Dr. Goin reported that C.P.S. is now negotiating with the Veterans Administration for an increase in the fees allowed for office and home visits. He also stated that C.P.S. is now considering the issuance of catastrophic contracts, to provide two years of care for a list of some 30 diseases or conditions. This would be issued as a rider to existing contracts.

Mr. Bowman discussed the balance sheet of California Physicians' Service as of November 30, 1949, and the operating statement for the eight months ended November 30, 1949. He pointed to the administrative cost for that period of 12.9 per cent, compared with an average of 13.29 per cent for the 15 prepayment plans of 200,000 or more enrollment, the largest of which had an administrative cost in excess of 20 per cent.

Dr. Goin summarized the report made by business analysts of the C.P.S. operations, the report showing notable improvement since an earlier study made in 1946-1947 and pointing to better operating conditions and an earnest endeavor by C.P.S. to follow sound business principles.

#### 6. *National Cancer Institute:*

Dr. Goin discussed the manner in which federal funds for cancer research, teaching and control are distributed and pointed to the merits and dangers in the present method of allocation. Dr. Halverson explained that the \$162,000 in such funds available in California is spent in conformity with plans worked out between the State Department of Public Health and the Association's Cancer Commission.

#### 7. *State Department of Public Health:*

Dr. Halverson discussed the public health problems created by the presence of large numbers of migrant workers in the San Joaquin Valley, pointed to the high infant mortality rate in this group and stated that 26 per cent of the state's infant deaths occurred in a group of valley counties. His department plans a fly eradication program in controlled areas next summer as a means of determining if infant diarrhea may be minimized; he asked that the Association offer other suggestions. A letter from Councilor Anderson along these lines was referred to the Committee on Public Health and Public Agencies.

#### 8. *Fees for Polio Cases:*

The question of payments to physicians for services in polio cases, where the National Foundation

for Poliomyelitis assumes the cost of care, was discussed and it was regularly moved, seconded and voted to refer this to the Committee on Public Health and Public Agencies.

#### 9. *Vocational Rehabilitation:*

A letter from Dr. Herbert I. Notkin, medical consultant to the Bureau of Vocational Rehabilitation of the State Department of Education, was read, the letter stating that the social servicing of applicants prior to the initial physical examination would represent a change in the bureau's policy and that the matter would be presented to the Medical Advisory Board of the bureau for consideration.

#### 10. *Committee on Public Health and Public Agencies:*

Dr. Alesen gave a progress report and stated that legislation was being prepared to define more accurately the scope of activities of laboratory technicians and technologists. He also reported on a recent meeting with a committee from the California Conference of Local Health Officers, at which progress was made in arriving at acceptable definitions of the scope of activities of health centers and the practice of public health.

#### 11. *Voluntary Health Insurance:*

Messrs. Eugene Robison, Gilbert Smith and Clarence Tookey appeared before the Council to request the cooperation of the Association in working out a fee schedule which could be considered a total fee for services provided to holders of commercial insurance policies below an accepted income ceiling. Dr. Ray reported on a meeting with insurance representatives in San Francisco along the same lines and it was agreed the special committee consisting of Doctors Lum, Ray and Ball should continue a study of the various proposals.

#### 12. *American Public Health Association:*

Dr. Louis Regan reported on the recent annual meeting of the American Public Health Association, called attention to the organizational setup of this association and urged that members of the Association take a greater interest in the A.P.H.A.

#### 13. *Academy of Forensic Sciences:*

Mr. Hassard called attention to the organization meeting of the Academy of Forensic Sciences, a national body interested in the replacement of the coroner system with a medical examiner system. On motion duly made and seconded, it was voted to appoint Dr. Louis Regan as the C.M.A. delegate to this meeting, to be held in Chicago, provided the Los Angeles County Medical Association will grant him the time to attend the session.

#### 14. *Committee on Interns and Residents:*

Dr. J. Lafe Ludwig, chairman of the Committee on Interns and Residents, presented a report which

advocated the publication of a bimonthly brochure to be sent to medical students, interns and residents, at an estimated cost of about \$3,000 annually. On motion duly made and seconded, this report was approved and the estimated funds appropriated for this purpose.

#### 15. *Committee on Postgraduate Activities:*

Dr. John Ruddock, chairman of the Committee on Postgraduate Activities, announced the resignation of Dr. Carroll B. Andrews as director of the committee's program. On motion duly made and seconded, this resignation was accepted with regret and with an expression of appreciation for the valuable services rendered by Dr. Andrews; the date of resignation is February 1, 1950.

Dr. Ruddock proposed the appointment of Dr. Charles A. Broaddus of Stockton to succeed Dr. Andrews, appointment to be on the basis of half-time at a compensation of \$500 monthly. On motion duly made and seconded, this appointment was voted.

Dr. Ruddock also requested that clerical help be secured for Dr. Broaddus on a full- or half-time basis and on motion duly made and seconded, such employment was approved.

Dr. Ruddock announced that the program of his committee would be aimed at providing postgraduate opportunities for all members of the Association, in urban as well as rural areas.

#### 16. *Weimar Sanitarium:*

The report of a special committee to review the medical care program of Weimar Sanitarium was considered and on motion duly made and seconded, it was voted to approve this report and to forward a copy to the board of supervisors in each county which participates in the operation of the institution.

#### 17. *Committee on Medical Education and Medical Institutions:*

A report of the committee, recommending against the approval of Association members serving as faculty members in a proposed school for drugless practitioners, was read and discussed. On motion duly made and seconded, the report was approved.

#### 18. *Nursing:*

Dr. Kneeshaw reported on a meeting held with representatives of the California State Nurses Association at which matters of mutual interest had been discussed. He recommended that a committee be appointed to meet with a similar committee of the C.S.N.A. when similar matters occur and on motion duly made and seconded, it was voted that the Chairman appoint such a committee.

A statement of the Association's attitude on nursing, ordered by the Executive Committee, was read and discussed. It was agreed that copies of this statement be sent to all members of the Council for consideration prior to the next meeting.

#### 19. *Legal Department:*

Mr. Hassard discussed several developments in medicolegal considerations, including a recent decision by the California Supreme Court holding that expert opinion is required in technical professional liability proceedings and that common knowledge is not sufficient in such cases. He also suggested that the California delegates to the American Medical Association take steps to bring about the creation of a department within the A.M.A. which could analyze and advise in advance on proposed federal appropriations for medical services. He also discussed the import of the new lobbying law adopted by the 1949 special session of the Legislature.

#### 20. *Public Relations:*

Clem Whitaker, Jr., reported that the Association's radio program, "California Caravan," has reached a new high listener rating. He also stated that a press conference recently held by a physician who had just returned from Europe had been most successful and urged that other physicians who have had an opportunity to study state medicine first-hand plan to hold similar press conferences.

#### 21. *Public Policy and Legislation:*

Dr. Cass reported on a meeting held in Denver on January 7, attended by representatives of 21 western state medical associations, at which several resolutions were adopted relative to pending federal legislation. On motion duly made and seconded, it was voted to prepare a resolution for California delegates to introduce in the A.M.A. House of Delegates to provide for the strengthening of the Washington office of the A.M.A.

#### 22. *California State Board of Nurse Examiners:*

A request from the California State Board of Nurse Examiners, for the nomination of two candidates for the appointment of one as a member of an advisory board, was read. It was regularly moved, seconded and voted that the Chairman make two nominations.

#### 23. *A.M.A. Industrial Health Conference:*

An invitation to attend an industrial health conference scheduled by the American Medical Association was discussed and it was regularly moved, seconded and voted that Dr. C. Kelly Canelo be sent as an official delegate to this meeting.

#### 24. *Los Angeles Anatomical Institute:*

An application of the Los Angeles Anatomical Institute for approval by the Association was discussed and it was regularly moved, seconded and voted to refer it to the Executive Committee.

#### 25. *Student Nurse Recruitment Program:*

On motion duly made and seconded, it was voted that the Chairman appoint a representative to serve

on a committee of nursing, nursing school and hospital representatives.

**26. Santa Clara County Medical Society:**

A request for financial participation in a public relations campaign of the Santa Clara County Medical Society was discussed and on motion duly made and seconded, it was voted to postpone action on this matter to the next meeting.

**27. Time and Place of Next Meeting:**

The next meeting will be held in San Francisco on Sunday, March 19, 1950, following the March 18 Conference of County Medical Society Secretaries.

Adjournment.

There being no further business to come before the meeting, it was adjourned at 6:20 p.m.

SIDNEY J. SHIPMAN, M.D., *Chairman*  
L. HENRY GARLAND, M.D., *Secretary*

## Executive Committee Minutes

### 217th Meeting

*Tentative Draft: Minutes of the 217th Meeting of the Executive Committee, San Francisco, December 14, 1949.*

The meeting was called to order by Chairman MacLean in Room 218 of the St. Francis Hotel, San Francisco, at 6:30 p.m., Wednesday, December 14, 1949.

**Roll Call:**

Present were President Kneeshaw, Council Chairman Shipman, Auditing Committee Chairman MacLean, Secretary Garland and Editor Wilbur. A quorum present and acting.

Present by request were Executive Secretary Hunton and Legal Counsel Hassard. Present by invitation were Drs. Frank J. Cox, Victor Dillon and A. B. Sirbu, representing the Western Orthopedic Association; Avery Hicks, representing ophthalmology; Ralph Teall, president of the Sacramento Society for Medical Improvement; Wayne Pollock, Councilor of the Eighth District; M. L. Skaggs and William B. Neff, anesthesiologists.

**1. Industrial Medical and Surgical Fees:**

Mr. Hassard was asked to review the history of medical and surgical fees for industrial injury cases and discussed the basis on which such fees had been established since the first fee schedule was adopted in 1913. Thereafter there was discussion on the schedule of fees arrived at by compromise between the subcommittee of the Executive Committee (Drs. Kneeshaw, Cass and Garland) and representatives of the compensation insurance underwriters. Objections to the approval of such a schedule or its offer to the Industrial Accident Commission for approval were voiced by the orthopedists and by the Sacramento Society for Medical Improvement. Both asked that a longer time be allowed for a more thorough study of the schedule by their groups. Dr. Hicks voiced disapproval of two specific items in the proposed schedule and Drs. Skaggs and Neff asked that certain changes be made in the schedule items affecting anesthesiology.

**2. Executive Session:**

At this point the Executive Committee went into executive session, at which time it was agreed that the subcommittee which had dealt with the insurance representatives had had authority to act, that it had acted in good faith and that good faith demanded the presentation of the schedule to the Industrial Accident Commission for approval. It was further agreed that Dr. Kneeshaw should present the schedule to the Industrial Accident Commission at its meeting of December 15, 1949.

Adjournment.

There being no further business to come before the committee, the meeting was adjourned at 12:05 a.m., December 15, 1949.

H. GORDON MACLEAN, M.D., *Chairman*  
L. HENRY GARLAND, M.D., *Secretary*

### 218th Meeting

*Tentative Draft: Minutes of the 218th Meeting of the Executive Committee, San Francisco, December 22, 1949.*

The meeting was called to order by Chairman MacLean in Room 212 of the St. Francis Hotel, San Francisco, at 2:00 p.m., Thursday, December 22, 1949.

**Roll Call:**

Present were President Kneeshaw, Speaker Aleson, Council Chairman Shipman, Auditing Committee Chairman MacLean and Secretary Garland. A quorum present and acting.

Present by request were Executive Secretary Hunton, Legal Counsel Hassard and Assistant Executive Secretary Wheeler.

**1. Industrial Medical Fees:**

A general discussion of the industrial medical fee situation was held and it was agreed that a letter be sent to the chairman of the insurance negotiating committee, outlining the basis of the proposed 1950 fee schedule.

On motion duly made and seconded, it was voted to send a copy of the 1950 fee schedule to secretaries of the county medical societies and to each member of the Association, with an appropriate foreword of explanation, such mailing to be made at the earliest practicable date. The Executive Secretary was instructed to send copies of the proposed foreword to all members of the Executive Committee for approval.

## 2. Local Health Officers:

On motion duly made and seconded, it was voted to notify the Committee on Public Health and Public Agencies that the Executive Committee considered it advisable to name one local health officer to each of the subcommittees of the main committee.

On motion duly made and seconded, it was voted to send a communication to the county medical societies to suggest that local health officers be invited to attend meetings of the county societies' councils, especially when matters relating to public health activities were to be subjects of discussion.

## 3. Committee on Public Health and Public Agencies:

It was agreed that a member of the standing Committee on Hospitals, Dispensaries and Clinics be added to the special Committee on Hospital Construction (Drs. Thompson and Anderson, Mr. Hassard) and Chairman Alesen of the Committee on Public Health and Public Agencies announced his intention to invite Dr. John C. Sharp of Salinas to accept such appointment.

## 4. Secretarial Conference:

After discussion it was agreed that the annual Secretarial Conference should be held in San Francisco on March 18, 1950, with the expectation that the Council would meet the following day. It was suggested that one or more county society executive secretaries be invited to discuss their county programs at this meeting.

## 5. C.M.A. Mailing List:

On motion duly made and seconded, it was voted to permit the California Academy of Sciences and the Department of Research and Statistics of the Industrial Accident Commission to use the Association's mailing list for approved literature.

## 6. Payments for Poliomyelitis Care:

Discussion was held as to the propriety of physicians accepting payments from national organizations for their care of poliomyelitis cases of non-indigent patients and it was agreed to discuss this matter further at the next Council meeting.

## 7. Legal Department:

Mr. Hassard reported on several legal matters, including the California Supreme Court decision in favor of a physician in a malpractice suit, the prosecution of anti-trust suits against two medical asso-

ciations and the passage of new legislation by the special session of the State Legislature.

On motion duly made and seconded, it was voted to prepare a statement on the Association's attitude toward the practice of nursing, to be sent to the county medical societies and to members of the Legislature. Dr. Kneeshaw and Messrs. Hassard and Hunton were instructed to prepare such a statement for the approval of the Executive Committee.

On motion duly made and seconded, it was voted that a documented article be prepared for prominent publication in CALIFORNIA MEDICINE relative to health insurance and the interest of some public officials in it, such article to be reviewed before publication by present and former officers of the Association.

On motion duly made and seconded, it was voted to instruct legal counsel to prepare an article for publication in CALIFORNIA MEDICINE to clarify the provisions of the hypnotic drug law adopted by the 1949 Legislature.

On a question of medical ethics relating to a physician associating with a lay laboratory technologist, legal counsel was instructed to investigate the consideration of such matters by the Judicial Council of the American Medical Association.

## 8. Care of War Veterans:

It was regularly moved, seconded and voted to make a suitable announcement in the official Journal of the advisability of ascertaining from veterans any rights they might have under federal laws for private care by physicians and to notify the California Department of the American Legion to that effect.

## 9. Employment of Executive Secretary:

In executive session it was regularly moved, seconded and voted to extend for a period of three years starting May 1, 1950, the employment contract of the Executive Secretary, compensation to be at the present level, with the provision that within the next six months a designated appointee of the Executive Committee review the compensation received by officers performing similar duties with other organizations and businesses, with a view toward possible upward revision of compensation.

## 10. Medical Economics:

Dr. MacLean reported that the Alameda County Medical Association, through the Committee on Medical Economics of the California Medical Association, in its study of physician-patient relationships plans to secure the services of a business psychologist, who would make a study along these lines. The Alameda County Medical Association is underwriting the expense of this study, with the thought that the California Medical Association may wish to share in the contemplated \$5,000 cost if the results appear to warrant such an appropriation. This sum has previously been appropriated by the Council for a study of physician-patient relationships which has been under way in the past two years.

### 11. *Additional Delegate to A.M.A.:*

The Secretary reported that the Association was entitled to eleven (11) Delegates and Alternates to the American Medical Association and that only ten (10) had so far been elected or appointed. The additional Delegate and Alternate would be entitled to serve on January 1 of the year following their election or appointment. On nominations duly made and seconded in each instance, R. Stanley Kneeshaw of San Jose was elected Delegate and Russel V. Lee of Palo Alto was elected Alternate, both to serve for the year 1950. It was pointed out that these offices for the term starting January 1, 1951, would be subject to election by the 1950 House of Delegates.

#### Adjournment.

There being no further business to come before the meeting, it was adjourned at 6:25 p.m.

H. GORDON MACLEAN, M.D., *Chairman*  
L. HENRY GARLAND, M.D., *Secretary*

### **C.P.S. to Change Contracts and Fees Only Once Yearly**

In order to avoid confusion and to permit better evaluation of any changes that are made, California Physicians' Service henceforth will make changes in contracts with beneficiaries and in fee schedules only once each year—at the meeting of the board of trustees on or after September 1. This policy, which was announced recently by Henry L. Gardner, M.D., secretary of C.P.S., in a letter to presidents of all county medical societies, was adopted by the board of trustees at its meeting in January.

"This action was taken," the letter explains, "because changes in the schedule and in our contracts have a very direct effect on our finances. Projections into the future cannot be made with any degree of accuracy without an adequate length of time to evaluate previous changes.

"We believe this will permit time not only for more adequate consideration of the schedule, but for study of the schedule in relation to existing contract rates and benefits for contemplated revision of contracts.

"Furthermore, we realize that changes are confusing to physician and beneficiary members alike, and making all necessary revisions at one specific time should make for smoother relationships.

"The Fee Schedule Committee functions on a continuing basis, and will continue to welcome suggestions from physician members. Their report will continue to be made at the annual meeting, but without the necessity for immediate action without due consideration."

## In Memoriam

DRAPER, DAVID BURRIS. Died in San Jose, January 17, 1950, aged 55, of a heart attack. Graduate of St. Louis University School of Medicine, 1921. Licensed in California in 1922. Dr. Draper was a member of the Santa Clara County Medical Society, the California Medical Association, and the American Medical Association.



LEWIS, FLOYD D. Died in Concord, January 24, 1950, aged 65, of lymphoblastoma and chronic myocarditis. Graduate of Willamette University Medical Department, Salem, Oregon, 1909. Licensed in California in 1921. Dr. Lewis was an Associate Member of the Alameda County Medical Association, and the California Medical Association.



MICHELSON, PAUL DANIEL, JR. Died in Berkeley, January 1, 1950, aged 56. Graduate of the College of Physicians and Surgeons of San Francisco, 1920. Licensed in California in 1920. Dr. Michelson was a member of the San Francisco County Medical Society, the California Medical Association, and the American Medical Association.



MORRISON, WAYLAND AUGUSTUS. Died in Los Angeles, January 5, 1950, aged 61. Graduate of Harvard Medical School, Boston, 1914. Licensed in California in 1914. Dr. Morrison was a member of the Los Angeles County Medical Association, the California Medical Association, and a Fellow of the American Medical Association.



PAGE, CLARENCE WINSLOW. Died in Berkeley, January 25, 1950, aged 70, of coronary occlusion. Graduate of Cooper Medical College, San Francisco, 1904. Licensed in California in 1904. Dr. Page was a member of the Alameda County Medical Association, the California Medical Association, and a Fellow of the American Medical Association.



YOAKAM, FRANK ARTHUR. Died in Moorpark, January 5, 1950, aged 74, after a long illness. Graduate of the National Medical University, Chicago, 1902. Licensed in California in 1921. Dr. Yoakam was a retired member of the Ventura County Medical Society, and the California Medical Association.